

July 22, 2014

Los Angeles County **Board of Supervisors**

> Gloria Molina First District

Mark Ridley-Thomas Second District

> Zev Yaroslavsky Third District

> > Don Knabe Fourth District

Michael D. Antonovich Fifth District

Mitchell H. Katz, M.D. Director

Hal F. Yee, Jr., M.D., Ph.D. Chief Medical Officer

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TO:

Supervisor Don Knabe, Chairman

Supervisor Gloria Molina

Supervisor Mark Ridley-Thomas Supervisor Zev Yaroslavsky

Supervisor Michael D. Antonovich

FROM:

Mitchell H. Katz, M.D.

Director

SUBJECT:

NOTIFICATION OF DEPARTMENT OF HEALTH SERVICES' USE OF DELEGATED AUTHORITY TO **EXECUTE SEVEN NEW AGREEMENTS FOR THE** PROVISION OF MEDI-CAL OUTREACH AND

ENROLLMENT COLLABORATIVE

This is to advise the Board of DHS' intent to exercise delegated authority approved by the Board on June 4, 2014 (attached), to execute seven new agreements with the Community Partners (CPs). selected as a result of a Request for Applications (RFA) process for Medi-Cal Outreach and Enrollment Collaborative.

The highest rated applicants for each Service Planning Area (SPA) were awarded Agreements as follows:

SPA	Agency Name
1	Bartz-Altadonna Community Health Center
2	Samuel Dixon Family Health Center, Inc.
3	Chinatown Service Center
4	Clínica Monseñor Oscar A. Romero
5	No applications were received for this SPA
6	University Muslim Medical Association, Inc.
7	AltaMed Health Services Corporation
8	Mission City Community Network, Inc.

Each Supervisor July 22, 2014 Page 2

On May 13, 2014, the RFA was released to existing CPs and Intensive Case Management Services (ICMS) providers. SPAs 5, 6, and 8 did not receive responsive applications. On June 19, 2014, the RFA was re-released for SPAs 5, 6, and 8. SPA 5 did not receive any applications for the second time.

The term of the Agreements is for two years effective upon execution. Each CP will receive a total contract sum of \$191,857 for the two year term, with an option to increase or decrease the total contract sum up to 50% to accommodate changes in the actual number of Medi-Cal applications processed by the CP. The contract sum includes funding for: 1) salary and benefits for a Full Time Certified Application Assistor or Certified Enrollment Counselor; 2) payments for Medi-Cal applications submitted; and 3) to process redetermination applications.

If you have any questions or require additional information, please let me know, or your staff may contact Kathy Hanks, at (213) 240-7819 or khanks@dhs.lacounty.gov.

MHK:sa

Attachment

c: Chief Executive Office County Counsel Executive Office, Board of Supervisors



County of Los Angeles CHIEF EXECUTIVE OFFICE

Kenneth Hahn Hall of Administration 500 West Temple Street, Room 713, Los Angeles, California 90012 (213) 974-1101 http://ceo.lacounty.gov

Board of Supervisors GLORIA MOLINA First District

MARK RIDLEY-THOMAS Second District

ZEV YAROSLAVSKY Third District

DON KNABE Fourth District

MICHAEL D. ANTONOVICH Fifth District

June 04, 2014

The Honorable Board of Supervisors County of Los Angeles 383 Kenneth Hahn Hall of Administration 500 West Temple Street Los Angeles, California 90012

Dear Supervisors:

AUTHORIZATION TO ACCEPT AND IMPLEMENT A GRANT AWARD FROM
THE STATE DEPARTMENT OF HEALTH CARE SERVICES FOR THE MEDI-CAL OUTREACH
AND ENROLLMENT ASSISTANCE PROJECT; EXECUTE RELATED CONTRACT AGREEMENTS
AND AMENDMENTS; DELEGATE THE SHERIFF AS AN ENTITY TO ASSIST WITH MEDI-CAL
APPLICATION SUBMISSIONS; AND DELEGATE HIRING AUTHORITY FOR FIVE CUSTODY
ASSISTANTS

(ALL SUPERVISORIAL DISTRICTS)
(4 VOTES)

SUBJECT

Authorize the Department of Public Health to accept and implement a grant award and future awards and/or amendments from the California Department of Health Care Services for the Medi-Cal Outreach and Enrollment Assistance Project; the Departments of Public Health, Mental Health and Health Services to enter into multiple agreements to implement the Project; delegate the Sheriff as an entity to assist with Medi-Cal application submission; and delegate hiring authority to the Sheriff's Department, subject to allocation.

IT IS RECOMMENDED THAT THE BOARD:

1. Authorize and instruct the Director of the Department of Public Health (DPH), or his designee, to accept and sign a grant award from the State Department of Health Care Services (DHCS) (Attachment A), effective upon the grant start date through December 31, 2016, in the amount of \$7,006,000 for Medi-Cal outreach, enrollment and retention under the Affordable Care Act for residents newly eligible, but difficult to reach, through integrated services provided by DPH and the Departments of Health Services (DHS), Mental Health (DMH), Public Social Services (DPSS) and the Sheriff's Department (LASD).

- 2. Delegate authority to the Director of DPH, or his designee, to accept future awards and/or amendments that are consistent with the requirements of the DHCS grant award, that extend or adjust the term of the grant award through March 31, 2018; reflect non-material and/or ministerial revisions to the award's terms and conditions; allow for the rollover of unspent funds and/or redirection of funds; and/or provide an increase or decrease in funding up to 25 percent above or below the grant's annual base amount, subject to review and approval by County Counsel, and notification to your Board and the Chief Executive Office (CEO).
- 3. Authorize and instruct the Director of DPH, or his designee, to execute contract amendments, substantially similar to Attachment B, for the provision of Medi-Cal outreach and enrollment assistance activities with the 17 existing Children's Health Outreach, Enrollment, Utilization and Retention (CHOEUR) contractors, identified in Attachment C, currently providing health coverage outreach, enrollment, and retention services, to increase the funding amounts, effective July 1, 2014, but no sooner than Board approval, through June 30, 2016, at a total estimated maximum obligation of \$1,368,000; 100 percent offset by the DHCS grant.
- 4. Authorize and instruct the Director of DPH, or his designee, to execute sole source agreements, substantially similar to Attachment D, with the eight existing Community Assessment Services Centers (CASC), identified in Attachment C, for the provision of Medi-Cal outreach and enrollment assistance service activities, effective July 1, 2014, but no sooner than Board approval, through June 30, 2016, at a total estimated maximum obligation of \$1,319,000, 100 percent offset by the DHCS grant.
- 5. Delegate authority to the Director of DHS, or his designee, to execute agreements with eight existing Community Partner and/or Intensive Case Management Services providers to be selected as the result of a Request for Applications (RFA) process, effective upon execution through June 30, 2016, at an estimated total amount of \$1,343,000 for all agreements, 100 percent offset by the DHCS grant, and subject to review and approval by County Counsel and 14 days prior notification to the Board and CEO.
- 6. Approve and authorize the Director of DMH, or his designee, to prepare, sign, and execute sole source Consultant Services Agreements, substantially similar to Attachment E, with Health Advocates, LLC and Mental Health Advocacy Services, Inc., effective upon Board approval through June 30, 2016. The Total Contract Amount (TCA) for Health Advocates, LLC and Mental Health Advocacy Services, Inc., will be \$449,000 per provider, funded by the DHCS grant.
- 7. Delegate authority to the Directors of DPH, DHS and DMH, or their designees, to prepare, sign, and execute amendments to the above contracts that extend or adjust the terms through March 31, 2018; allow the rollover of unspent contract funds; and/or, wherever applicable, provide a 10 percent increase or decrease in funding for each respective contract provided that each corresponding department's total payments to their respective contractors do not exceed the total grant allotment for that department; effective upon amendment execution or at the beginning of the applicable contract term, subject to review and approval by County Counsel, and notification to your Board and the CEO.
- 8. Delegate authority to the Direct of DPH, DHS and DMH or their designees, to execute future amendments or change notices to the above agreements and contracts that authorize modifications to or within budget categories within each budget consistent with the existing scope of services; add and/or change certain terms and conditions imposed by the funding source or by applicable federal or State law or regulation; annually adjust each CASC contractor's fee-for-service reimbursement rate(s) up to 10 percent above or below the existing rate; and make changes consistent with the

existing scope of services, at no additional cost.

- 9. Designate the Sheriff as an entity to assist county jail inmates with Medi-Cal application submissions. The Sheriff agrees to perform the function of Medi-Cal application assistance for County jail inmates as required by Penal Code Section 4011.11.
- 10. Approve 5.0 Full Time Equivalent (FTE) Custody Assistants for the Sheriff's Department in excess of that which is provided for in the Sheriff's staff ordinance pursuant to Section 6.06.020 of the County Code, and subject to allocation by the CEO. The positions will be 100 percent funded by the DHCS grant through the life of the grant.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

Due to changes in federal and State laws, Medi-Cal has expanded eligibility for health care coverage as of January 1, 2014. It is estimated that nearly 1.1 million uninsured individuals in Los Angeles County are now eligible for Medi-Cal, including those newly eligible for Medi-Cal under Health Care Reform and those previously eligible but not enrolled. DHCS accepted contributions from The California Endowment and secured federal matching funds, making \$25 million available statewide, for the purpose of implementing outreach and enrollment activities for the following newly eligible but hard-to-reach target populations:

- 1. Persons with mental health disorders
- 2. Persons with substance use disorders
- 3. Persons who are homeless
- 4. Young men of color
- 5. Persons who are in county jail, county probation, or under post release community supervision
- 6. Families of mixed-immigration status
- 7. Persons with limited English proficiency

In November 2013, a consortium of County Departments: DPH, DHS, DMH, DPSS, and LASD submitted a joint application that contained each Department's individual Medi-Cal outreach and enrollment work plan. Attachment F is a detailed summary of each Department's accepted work plan and narrative summary. On January 28, 2014, DHCS notified the County of the two-year grant award of \$7.006 million for participation in the Medi-Cal Outreach and Enrollment Assistance Project.

Approval of the above recommended actions will allow DPH to accept the DHCS grant award and allow each Department to rapidly implement the outreach and enrollment services in the individual work plans to complete the grant deliverables within the timeframe required by DHCS.

A memorandum of understanding (MOU) will be finalized and signed by all five Departments, subject to review and approval by County Counsel. The MOU will help to ensure that the County timely submits all required reports and claims as required by DHCS.

In order to coordinate the accomplishment of the DHCS grant's objectives and deliverables, DPH will solicit for a Project Manager on a temporary basis through DPH's existing master agreement for temporary personnel services. Due to DHCS's rapid implementation of this two-year grant, DPH and DMH will enter into new contracts or amend existing agreements to enable the County's timely participation in the Medi-Cal Outreach and Enrollment Assistance Project. These agreements are mainly with already existing contractors that are already providing Medi-Cal outreach, enrollment, and retention services, and/or contractors that are already working with a specific subset of the

target populations.

Department of Public Health

There are two DPH programs participating in the Project: Maternal, Child and Adolescent Health Programs (MCAH) and Substance Abuse Prevention and Control (SAPC). MCAH will amend existing CHOEUR contracts that were solicited and entered into after a competitive bid process to allow for immediate participation in the Project. SAPC will enter into new contracts with its eight existing lead contracted agencies operating Community Assessment Service Centers (CASC) and its 18 network sites located throughout the County with multiple sites.

MCAH's CHOEUR contractors currently provide Medi-Cal outreach and enrollment services focused on children, and will expand their population target to the families (with children) of mixed-immigration status and limited English proficiency. MCAH is the County's lead program for the Project, and will provide outsourced training on outreach and enrollment strategies both to its providers and the providers of other Departments. Additionally, MCAH's established online database system will be used by some, but not all, of the participating Departments as a receptacle for outreach and enrollment data. The Project Manager will report to MCAH. The proposed two-year allocation for MCAH is \$1,462,000 for contract services, and \$200,000 for the Project Manager.

SAPC's CASCs do not currently provide formal Medi-Cal outreach and enrollment services, but, as proposed to DHCS, are key partners to reaching specific target populations with substance abuse disorders, as the CASC contractors already provide clinical assessment and placement services throughout the County. The CASCs already have the necessary programmatic infrastructure to work with all substance use disorder (SUD) treatment programs in each Service Planning Area (SPA) to conduct outreach and enrollment assistance activities. In addition, each CASC's experience working with California Work Opportunity and Responsibility to Kids (CalWORKs) and General Relief (GR) recipients has created related expertise in working with DPSS on Medi-Cal eligibility and enrollment procedures. MCAH will provide training for outreach and enrollment services to CASC staff; and SAPC will use its own IT system that the CASCs are already using to collect and transmit enrollment and other Project data. As a result, these contracted CASC providers will conduct countywide outreach and enrollment services to new and current patients of County-contracted SUD treatment programs. The proposed two-year allocation for SAPC is \$1,392,000.

Department of Health Services

DHS contracts with Community Partners (CP) clinics and homeless Intensive Case Management Services (ICMS) providers, many of whom currently do some form of Medi-Cal outreach and enrollment. Because the number of available CP and ICMS contracted providers that have some Medi-Cal outreach and enrollment experience is greater than needed by the DHS work plan, and the limitations on the amount of available grant funding, a RFA is being issued to existing CP and ICMS providers. Selected grantees will be funded to enroll into Medi-Cal DHS' target populations (persons who are homeless, families of mixed immigration status, young men of color and persons with limited English proficiency) outside of the traditional medical clinic setting. Training, if necessary, will be available through MCAH; and DHS will use MCAH's online database to track and transmit data. The proposed two-year allocation for DHS is \$1,343,000.

Department of Mental Health

DMH will enter into consultant agreements with Health Advocates, LLC, and Mental Health Advocacy Services, Inc. The two benefits establishment agencies will work collaboratively with DMH directly-operated clinics and contracted agencies to provide outreach, education and benefits enrollment services to uninsured persons who are newly-eligible for Medi-Cal under the Patient Protection and Affordable Care Act. In particular, the two benefits establishment agencies will target potentially-

eligible individuals with mental health needs in traditionally hard-to-reach subpopulations, including under-represented ethnic minorities, homeless persons, individuals with co-occurring mental health and substance use disorders, young men of color, and transition-age youth. DMH will work with the agencies to determine the system they will use to track and transmit data. The proposed two-year allocation-for DMH is \$1,109,000.

Department of Public Social Services

As the County's Medi-Cal administrator, DHCS funding will be provided for outreach activities that are not allowable under the Department's existing funding rules. A Purchase Order process, which does not require Board approval, will be utilized to fund and acquire materials to further DPSS' current outreach efforts. These outreach funds will allow the developing and purchasing of outreach material that specifically target young men of color and encourage them to attend events and enroll in Medi-Cal. DPSS will use its own IT system, LEADER, to track data. The proposed two-year allocation for DPSS is \$500,000.

Sheriff's Department

LASD will work with onsite DPSS personnel to enroll eligible inmates into Medi-Cal prior to release. Target population is persons who are in County jail, as well as persons with mental health and substance abuse disorders, and young men of color. Custody Assistants (CA) will be hired using DHCS funds to assist with the application process that will begin in the inmate housing area, an area accessible by the CA, but not by DPSS personnel unescorted. Upon termination of the two-year grant, LASD intends to absorb the positions and move them to fill existing budgeted and vacant CA positions. In 2007, a study indicated enrollment of mentally-ill individuals in Medicaid prior to release from jail can reduce their recidivism. Training for CAs will be provided by DPSS; LASD will use DPSS' online database to track and transmit data. The proposed two-year allocation for LASD is \$1,000,000.

Implementation of Strategic Plan Goals

The collaborative effort of the County Departments to jointly pursue grant funds and reduce the uninsured population address Goals 1, Operational Effectiveness; Goal 2, Fiscal Sustainability; and Goal 3, Integrated Services Delivery.

FISCAL IMPACT/FINANCING

The Departmental allocation of the grant funds was determined by the CEO. DHCS requires 50 percent of the total grant award to be allocated to CBOs. The CEO recommendation allocates 76 percent of the total grant award to Departments with work plans that fund CBOs: DPH, DHS and DMH. Even assuming some level of administrative costs are eligible for reimbursement, the 50 percent requirement will be met. More clarification is pending from the State on allowable administrative costs.

As the fiscal intermediary for the grant, all revenue from DHCS will be received by DPH and then intrafund transferred to the Departments. Appropriation for future fiscal years will be requested in each Department's FY 2014-15 budget.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

Board approval is required to accept the grant and implement all actions related to the grant, which

will allow MCAH, SAPC, DHS and DMH to initiate contract processes. DHS will report to the Board under separate cover the providers awarded through the RFA and each providers' funding allocation. .

Board Policy, Section 5.100, requires County Departments intending to negotiate a sole source services contract of \$250,000 or greater, to provide advance written notice to your Board. DMH informed your Board on April 10, 2014, of its intent to enter into sole source agreements with Health Advocates, LLC, and Mental Health Advocacy Services, Inc. SAPC's agreements are within the \$250,000 threshold, and as such no prior Board notification of the sole source was issued.

The Sole Source Checklists for DMH and DPH, which identify and justify the need for sole source contract actions, were reviewed and approved by CEO (Attachment G).

Additionally, DHCS grant award general terms and conditions (Attachment A) include provisions requiring the County to indemnify the State for all claims and losses related to this grant award. This is a standard requirement from the State and cannot be waived or modified.

County Counsel has approved Attachments A, B, D, and E as to form.

CONTRACTING PROCESS

Per State guidelines on the Project, awardees are required to respond rapidly by ensuring required services are initiated in a timely fashion. As such, it was determined necessary to utilize contractors that have the demonstrated expertise and capacity to initiate the required services in a timely fashion, as the immediate commencement of services to be provided under this grant will ensure the maximum possible draw-down of grant funding and, thus, ensure the maximum amount of services will reach the target populations. Accordingly, the award of contracts to qualified contractors on a sole source basis will maximize the value of services to be provided under the grant and is, therefore, in the best interest of the County.

The two benefits establishment agencies selected by DMH, Health Advocates, LLC, and Mental Health Advocacy Services, Inc., were recently evaluated and deemed qualified during a separate open competitive solicitation to identify contract providers that specialize in Medi-Cal, Social Security Disability Insurance (SSDI), and Supplemental Security Income (SSI) benefits establishment services. With their demonstrated expertise in benefits establishment services, as well as, their current capacity and infrastructure, both agencies clearly have the demonstrated experience and the necessary knowledge to initiate the required outreach and benefits establishment services stipulated by this State grant in a timely manner.

Thirteen of the MCAH CHOEUR agencies selected (listed on Attachment C) were recently evaluated and deemed qualified during a separate open competitive solicitation to identify contract providers that specialize in health coverage outreach, enrollment, utilization, retention and training services. Three agencies also listed in Attachment C (City of Pasadena, City of Long Beach, and the Los Angeles Unified School District (LAUSD)) are included in the Project because of the need to include all public health jurisdictions in the County in outreach and enrollment services and the unique ability of LAUSD to link outreach and enrollment services with the school-based population. The remaining contractor, Computer Therapy, LLC, is the current vendor that maintains the MCAH online database for outreach and enrollment data collection, and continues to further develop the database and train users of the database. With all seventeen agencies' demonstrated expertise in health coverage outreach, enrollment, utilization and retention services, these agencies clearly have the experience and necessary knowledge and resources to initiate the required outreach and enrollment services

stipulated by the DHCS grant in a timely manner.

The eight existing SAPC contracted CASCs (listed on Attachment C) were previously selected through a separate open competitive solicitation for their specialized expertise in engaging patients in SUD recovery services and for having the necessary programmatic infrastructure to work with all SUD treatment programs in each Service Planning Area and Supervisorial District to conduct outreach and enrollment assistance activities.

IMPACT ON CURRENT SERVICES (OR PROJECTS)

Insuring the uninsured helps mitigate the burden on all County safety net systems, by reducing recidivism into the criminal justice system and improving the health and well-being of County residents.

Respectfully submitted,

WILLIAM T FUJIOKA

Chief Executive Officer

WTF:GP TOF:bjs

Enclosures

c: Sheriff

Executive Office, Board of Supervisors

County Counsel

Health Services Mental Health

D. I.I. II. III

Public Health

Public Social Services

JUNE 10, 2014

Leveraging State Grant Dollars to Enroll At-risk Populations into Expanded Medi-Cal

THEREFORE I MOVE THAT THE BOARD OF SUPERVISORS:

Direct the Directors of the Departments of Public Health, Mental Health, Health Services, Public Social Services and the Sheriff to:

- Provide the Board with 14 days prior written notification before any roll over or redirection of unspent funds or before providing any increase or decrease in funding any entities;
- 2. Provide quarterly written updates of their enrollment progress, by department, broken down by targeted enrollment groups and Service Planning Areas;
- Take cost neutral steps to strive to enroll at least 10% more than the current enrollment targets and in the case of the Sheriff's Department, enroll 7,500 individuals; and
- 4. Make reasonable efforts to ensure enrollment activities target areas of highest need and engage faith-based institutions.

YV

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RIDLEY-THOMAS	
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ANTONOVICH	· · · · · · · · · · · · · · · · · · ·
KNABE	